

Form CPF M 102: Campaign Finance Report Municipal Form Office of Campaign and Political Finance

of Massachusetts			RECEIVED
File with: City or Town Clerk or Ele	Please print or type all i	information, except signature	GITY CLERK'S OFFICE
City of Town Clerk of Ele	ction Commission — I lease print or type arri	mornation, except signature	2009 JAN 20 P 2: 38
Fill in dates: Reporting Period	1 7	Year Mor S Ending Dec	EMBOSTON MADOR
Type of report: ☐ 8th day precedi		tion □30 day after election	n ∐year-end report □dissolution
Joseph	Re Rucker	Committee TO El	LET J.R. RUCKER
Bosion city	ame of Candidate (if applicable) g Council Dist, & 4		nmittee Name Rucken
, , ,	Office Sought and District	Name of Co	ommittee Treasurer
DORCHEST.	Residential Address	Committe	e Mailing Address ASS. 617486 0315
	Tel. No. (optional)		Tel. No. (optional)
Lin Lin Lin Lin Lin Lin	ne 1: Ending balance from property in the 2: Total receipts this period ne 3: Subtotal (line 1 plus line 2) ne 4: Total expenditures this ne 5: Ending balance (line 3 min ne 6: Total in-kind contribution ne 7: Total (all) outstanding liame 8: Name of bank(s) used	period (page 3, line 14) us line 4) us this period (page 4) bilities (page 4)	\$ 60,000 \$ 120,000 \$ 180,000 \$ 60,000 \$ 0 \$ 0 \$ 0 \$ 0
campaign finance act	examined this report including attached schedules and tivity, including all contributions, loans, receipts, expanyaign finance activity of all persons acting under Signed under the penaltic	enditures, disbursements, in-kind of the authority or on behalf of this	contributions and liabilities for this reporting period
Treasurer's signatur	re (in ink)		Date
	FOR CANDIDATE FILINGS	ONLY: (CANDIDATE MUST S	SIGN BELOW)
Candidate with a I certify that I have campaign finance at have not received an ☐ Candidate witho I certify that I have campaign finance at	Committee and no activity independent of the comexamined this report including attached schedules are ctivity, of all persons acting under the authority or on the committee OR Candidate with independent activity, including contributions, loans, receipts, experimentally, experimen	nd it is, to the best of my knowled on behalf of this committee in acc expenditures on my behalf during tivity filing separate report and it is, to the best of my knowled inditures, disbursements, in-kind co the authority or on behalf of this	cordance with the requirements of M.G.L. c. 55. Ithis reporting period. Ige and belief, a true and complete statement of all contributions and liabilities for this reporting period



Schedule E Disclosure of Assets Statement Office of Campaign and Political Finance

This form should be filed by			year end and each diss	olution report.
ommittee Name: Committee To	elect 5	R RUCKER	Date of re	port: 1-1309
All ca	ndidates and co	ommittees must fill in pa	rt A or part B.	
art A:			<u></u>	
No assets* were acquired or disp	osed of hy this a	randidate/committee duri	ing the period covered	by this statement.
eart B:	osca or by mis v		and ported covered	• • • • • • • • • • • • • • • • • • •
ssets acquired: List all assets acqu	ired since the co	mmittee last filed this sta	tement. If this is the fir	st Schedule E you
ave filed, list all assets.	•		·	r
Asset	Date	Present Location	Manner Acquired	Cost/Value
nclude year, model or other identifying information, if applicable.	Acquired			
	• • • • • • • • • • • • • • • • • • • •	C	time meried acrossed by	his statement
ssets disposed of: List all assets so				
Asset aclude year, model or other identifying	ld, traded or tra Date Acquired	Disposition to: Name and Address	Date and Manner of Disposition	his statement. Disposition Value Attach statement of how value is determined.
Asset aclude year, model or other identifying	Date	Disposition to:	Date and Manner	Disposition Value Attach statement of how
Asset clude year, model or other identifying	Date	Disposition to:	Date and Manner	Disposition Value Attach statement of how
Asset aclude year, model or other identifying	Date	Disposition to:	Date and Manner	Disposition Value Attach statement of how
Asset aclude year, model or other identifying	Date	Disposition to:	Date and Manner	Disposition Value Attach statement of how
Asset clude year, model or other identifying	Date	Disposition to:	Date and Manner	Disposition Value Attach statement of how
Asset	Date Acquired	Disposition to: Name and Address political purpose for which the	Date and Manner of Disposition	Disposition Value Attach statement of how value is determined.

Attach additional sheets, if necessary, to disclose all assets acquired or disposed of in a reporting period.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
12-31-8	CITIZENS BANK	MOKNISEY BLUD * DORUHESTER MA	CHECKING ACCOUNT	1/20 -
-				
		Tin- 10	Expenditures over \$50	120,-
			Expenditures \$50 and under	
	Enter on page 1, line 4		:TOTAL EXPENDITURES	

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
• •			***	
	1.			
		Line 15: In-k	ind over \$50	0
		Line 16: In-k	ind \$50 and under	0
	Enter on page 1, line 6	Line 17: Tota	al In-kind	0

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
				8
	Enter on page 1, line 7	Line 18: OUTSTANDING	LIABILITIES (ALL)	0

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

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